IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF SOUTH CAROLINA

| Clyde Preston Chamell II [Enter the full name of the pidintiff in this action] |) Civil Action No. 2:12-cv-303-MBS-BHH |
|---|--|
| [Enter the full name of the plaintiff in this action] |) (to be assigned by Clerk) |
| v. | COMPLAINT State Prisoner |
| Lucis Miles |) |
| Evians Carectional Inst. | 2012. |
| 610 Hightway 7 West | REGISTOR CLERK. |
| Bennettsville, SC 29512 | ≥ ECEI ≥ E. C 1 27 |
| Enter above the full name of defendant(s) in this action |) P 플립 |
| Enter above the full name of defendant(s) in this action | 2: 03 |
| I. PREVIOUS LAWSUITS | 33 |
| A. Have you begun other lawsuits in state or federal court dealing votherwise related to your imprisonment? B. If your answer to A is Yes, describe the lawsuit in the space by additional lawsuits on another piece of paper using the same out 1. Parties to this previous lawsuit: | YesNo |
| Plaintiff: | 7 8 |
| Defendant(s): | ~ |
| 2. Court: | B 공공 - 공유 |
| (If federal court, name the district; if state o | 5 TT |
| 3. Docket Number: | → 12°C |
| 4. Name(s) of Judge(s) to whom case was assigned: | and the second of the second o |
| 5. Disposition: (For example, was the case dismissed? Application) | \Box |
| 6. Approximate date of filing lawsuit: | specieu. I chuing. j |
| 7. Approximate date of disposition: | |

| Is there a prisoner grievance procedure in this institution? Yes No |
|---|
| When Non 13, 2011 Grievance Number (if available) e you received a final agency/departmental/institutional answer or determination concerning this matter (i.e., your rance)? No N |
| e you received a final agency/departmental/institutional answer or determination concerning this matter (i.e., your ance)? Yes |
| n was the final agency/departmental/institutional answer or determination received by you? No existible, please attach a copy of your grievance and a copy of the highest level decision concerning your grievance you have received. The property of your grievance and a copy of the highest level decision concerning your grievance you have received. The property of your grievance and a copy of the highest level decision concerning your grievance you have received. The property of your grievance and a copy of the highest level decision concerning your grievance you have received. The property of your grievance and a copy of the highest level decision concerning your grievance you have received. |
| ere is no prison grievance procedures in this institution, ou complain to prison, jail, or institutional authorities? Yes No |
| ere is no prison grievance procedures in this institution, ou complain to prison, jail, or institutional authorities? YesNo |
| ou complain to prison, jail, or institutional authorities? Yes No |
| ur answer is YES: |
| |
| What steps did you take? |
| What was the result? |
| |
| below, place your name, inmate number, and address in the space provided. Do the same for additional plaintiffs, |
| e of Plaintiff: [14de Preston Chappell Inmate No.: 335214 |
| ess: 610 Highway 9 West, Bennettswille, SC 29512 |
| om B below, place the full name of the defendant, his official position, and place of employment in the space ded. Use Item C for additional defendants, if any. |
| e of Defendant: Linca's Miles Position: Lt. |
| of Employment: Eugns Correctional Inst. |
| tional Defendants (provide the same information for each defendant as listed in Item B above): |
| 27 |

Complaint - State Prisoner Revised October 3, 2007 2:12-cv-00303-MGL Date Filed 02/01/12 Entry Number 1 Page 3 of 4

IV. STATEMENT OF CLAIM

State here, as briefly as possible, the <u>facts</u> of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need. Attach an extra sheet if necessary.

| ٧. | REL | IEF |
|----|-----|-----|
| | | |

| State briefly and exactly what you want the court to do for you. |
|--|
| Mr. Miles to be terminated from SCDC (South Carolina Dept of |
| (arrections), transfer to another institution, and more itary compensation |
| I would like to be transfer to another inst. |
| - Moncitary Relief |
| - Mr. Niles be charged with Simple Assalt and descrimination |
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| I declare under penalty of perjury that the foregoing is true and correct. |
| |
| Signed this 24th day of January . 20 12 |
| Clyde Preston Choppell III |

Signature of Plaintiff